



Application No.: 09/856766

Docket No.: UFJ-002US

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. **EV 311022380 US**, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, on the date shown below.

Dated: January 28, 2004

Signature:

(Jane E. Remillard)

Docket No.: UFJ-002US
(PATENT)

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FEB 06 2004
TECH CENTER 1600/2900

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Harry S. Nick, et al

Application No.: 09/856766

Group Art Unit: 1636

Filed: August 28, 2001

Examiner: R. Akhavan

For: MANGANESE SUPEROXIDE DISMUTASE
REGULATORY ELEMENTS AND USES
THEREFORE

AMENDMENT AND RESPONSE

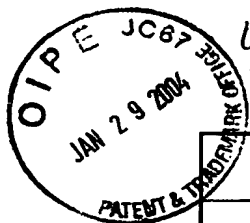
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Dear Sir:

This communication is in response to the Office Action dated July 28, 2003 (Paper No. 5). Responsive to the Office Action, please amend the above-identified U.S. patent application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 6 of this paper.



AMENDMENT TRANSMITTAL LETTER

Docket No.
UFJ-002USApplication No.
09/856766-Conf. #2342Filing Date
August 28, 2001Examiner
Ramin AkhavanArt Unit
1636Applicant(s): Harry S. Nick *et al.*Invention: MANGANESE SUPEROXIDE DISMUTASE REGULATORY ELEMENTS AND USES
THEREFORE

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TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

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CLAIMS AS AMENDED

	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	23	- 30 =		x	0.00
Independent Claims	4	- 6 =		x	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within third month					475.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					475.00

☐ Large Entity☒ Small Entity☐ No additional fee is required for this amendment.☒ Please charge Deposit Account No. 12-0080 in the amount of \$ 475.00

A duplicate copy of this sheet is enclosed.

☐ A check in the amount of \$ _____ to cover the filing fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge and credit Deposit Account No. 12-0080 as described below. A duplicate copy of this sheet is enclosed.☒ Credit any overpayment.☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.
Jane E. Remillard

Attorney Reg. No.: 38,872

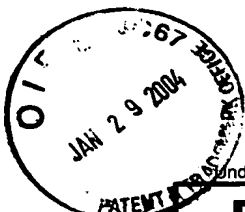
LAHIVE & COCKFIELD, LLP
28 State Street
Boston, Massachusetts 02109
(617) 227-7400

Dated: January 28, 2004

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Dated: January 28, 2004

Signature:  (Jane E. Remillard)



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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003, Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 475.00

Complete if Known	
Application Number	09/856766-Conf. #2342
Filing Date	August 28, 2001
First Named Inventor	Harry S. Nick
Examiner Name	Ramin Akhavan
Art Unit	1636
Attorney Docket No.	UFJ-002US

RECEIVED

FEB 06 2004

TECH CENTER 1600/2900

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number: 12-0080

Deposit Account Name: Lahive & Cockfield, LLP

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)					
Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	475.00
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,330	2453	665	Petition to revive - unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37CFR 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	
Other fee (specify)					
*Reduced by Basic Filing Fee Paid					SUBTOTAL (3) (\$) 475.00

FEE CALCULATION				
1. BASIC FILING FEE				
Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1001	770	2001	385	Utility filing fee
1002	340	2002	170	Design filing fee
1003	530	2003	265	Plant filing fee
1004	770	2004	385	Reissue filing fee
1005	160	2005	80	Provisional filing fee
SUBTOTAL (1) (\$)				0.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE				
Total Claims	23	-30** =		
Independent Claims	4	-6** =		
Multiple Dependent				
Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$)				0.00
**or number previously paid, if greater; For Reissues, see above				

SUBMITTED BY		(Complete if applicable)	
Name (Print/Type)	Jane E. Remillard	Registration No. (Attorney/Agent)	38,872
Signature		Telephone	(617) 227-7400
		Date	January 28, 2004

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Dated: January 28, 2004 Signature: (Jane E. Remillard)